Reg. No. 22,662

Attorney Docket No. D/A1147

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

Reg. No. 35,782;

Nola Mae McBain

Xerox Corporation

ADDRESS ALL CORRESPONDENCE TO:

100 Clinton Avenue South, Xerox Sq. 20th Floor

Patent Documentation Center

Rochester, New York 14644

	NEU. NU. ZU.4UZ.	EUZAVEULE, MALASEK		
Mark Costello Ronald F. Chapuran	Reg. No. 31,342; Reg. No. 26,402;	Eugene O. Palazzo Elizabeth F. Harasek	Reg. No. 20,881; Reg. No. 28,850;	
to prosecute this applic therewith.	cation and transact all b	or, I hereby appoint the following outliness in the Patent and Tra	demark Office connected	
(Number)	(Country)	(Day/Month/Ye	ear Filed)	
Prior Foreign or U.S. Prov	isional Application(s)			
application(s) for patent lis	sted below, and have a	nited States Code, §119 of a also identified below any foreign that of the application on which	n application(s) or Provision	
I acknowledge the duty to of Federal Regulations, §1		ich is material to the patentabil	ity as defined in Title 37, Co	de
I hereby state that I have the claims.	eviewed and understan	d the contents of the above-id	entified specification, includ	ing
the specification and claim are attached heretory		ed on as U.S. Appli	cation No	
	are listed below) of the	if only one name is listed belo subject matter which is clair STRIPPING SYSTEM		
My residence, post office a	address and citizenship	are as stated below next to my	name,	
As a below named invento	,			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Paul F. Morgan

Paul F. Morgan

585-423-3015

DIRECT TELEPHONE CALLS TO:

(name and telephone number)

DECLARATION AND POWER OF ATTORNEY, continued

Name of sole or first inventor:

Robert M. Jacobs

Inventor's Signature:

685 Lake Road, Ontario, NY 14519

Residence: Citizenship:

USA

Date:

Mailing Address: (Same as above)